

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		19	3/01
FORMALITY REVIEW	TV	876	3/06/01
RESPONSE FORMALITY REVIEW	SS	573	06-22-01

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 -/ ..... Restricted      O ..... Objected

Claim	Date
Final Original	
1	3/6/01
2	3/6/01
3	3/6/01
4	3/6/01
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Claim	Date
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If more than 150 claims or 10 actions  
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